### California Film and Television Tax Credit Program 2.0

# EXPENDITURE SUMMARY REPORT

# **Independent Productions**

Please carefully read the informational materials on the CFC website before filling out this report.

### **TITLE**



CFC Use Only:							
DATE RECEIVED:							
QUEUE # CAL # FISCAL YEAR:							
CATEGORY:							

#### PHASE 4

Section 1: APPLICANT INFORMATION									
*Applicant I	Entity or I	ndividual/Title	(if Individual):						
Name:					Title:				
Address:									
City:					State:		Zip:		
Country:		Emai	l:						
Phone:			Cell phone:			Fax:			
Taxpayer ID:			Seller Permit # (if applicable)			Copyright Reg #			
Type of Ent	tity:								
Parent Company, if applicable				☐ Check here if same as Applicant;					
Name:					Title:				
Company N	lame:								
Address									
City:					State:		Zip:		
Country:		Emai	l:						
Phone:			Cell phone:			Fax:			

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#### **Section 2: CONTACT INFORMATION** A. Payroll Service Company Name: Paymaster: Address Email: Phone: **B. Distributor - Domestic or International** Company Name: Contact Email: Phone: C. Agreed Upon Procedures - CPA Firm Information CPA Firm: CPA: License or Permit # Address Email: Phone: **Section 3: PROJECT INFORMATION** A. Type of Production ☐ Feature Film (Theatrical) ☐ Feature Film - Direct to DVD / VOD $_{\hfill \square}$ Movie of the Week $_{\square}$ Mini-Series □ Returning TV Series □ Pilot □ New TV Series $\hfill\Box$ Check this box if TV pilot was initially accepted in the program. # of episodes this season ☐ Over 40 minutes running time, exclusive of commercials. **B. Production Schedule** Start Date of Pre-Production: End Date of Principal Photography: Start Date of Principal Photography: End Date of Post-Production: Projected or Actual Release Date:

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Section 4: PRODUCTION SHOOT DAYS AND LOCATION					
A. Principal Photography (PP) Days					
a. Total PP days in Los Angeles zone:		f. Total PP days:	0		
b. Total PP days outside LA zone (in CA):		g. Total % CA PP days (c ÷ f x 100):	#DIV/0!		
c. Total CA PP days:	0	h. Estimated total CA 2nd unit / stunt / VFX days:			
d. Total % PP outside LA Zone:	#DIV/0!	i. Total PP facility days:			
e. Total non-CA PP days:		j. Total % PP facility days:	#DIV/0!		

B. If shot outside of LA zone, indicate CA counties:

C. If shot outside the State, state(s) or country(s):

## **Section 5: PRODUCTION STATISTICS**

A. Labor Statistics for In-State Work						
Total # of Cast Members:		Total Extras / Stand-ins Man-Days**:				
Total Cast Man-Days**:		Total # of Qualified & Non-Qualified CA Residents:				
Total # of "Base" Crew Members*:		Total # of Qualified & Non-Qualified Non-residents:				
Total Crew Man-Days**:		Total # of CA Vendors:				

<sup>\*</sup> Base crew is the average number of staff and shooting crew employed per day.

<sup>\*\*</sup> The sum of the number of days, full or partial, a person is estimated to work.

B. California Income Taxes Withheld		C. Total Production Spend				
Total state income taxes withheld on qualified AND non-qualified wages:		Total California Expenditures (Qualified & Non-Qualified):				

#### D. Employment Diversity Information

Note: Complete the information for cast and crew (do not include extras) to the extent possible and based only upon information provided by the individual cast and crew members in their payroll start information.

	# of H	Hires	# of Days Worked		
	Male	Female	Male Female		
Asian Pacific					
Black					
Caucasian					
Latino / Hispanic					
Native American Indian					
Unknown / Other					
TOTAL	0	0	0	0	

Sectio	n 6: Jobs Ra	tio						
Please inp	out original Jobs Ra	io from applica	tion and actu	ual spend Jo	obs Ratio as	s per the CPA pe	rforming the	AUP.
Jobs Ra	atio from Application	Jobs	Ratio from Ac	tual Spend		Percent Decreae	gjigal	Percent Increase
						#DIV/0!	Offerential	#DIV/0!
							4	
Sectio	n 7: ESTIMA	TED CRED	OIT ALLO	CATIO	N			
Total Qua	alified Wages							
Total Qua	alified Non-Wages							
	npletion Bond Fee Expenditures:	no more than 2	2% of	0				
D. Total (	Qualified Expendit	ures				\$		•
Estima	ated Tax Cred	dit Allocati	on					
Total Qualific	ed Wages & Nonwages	х	-	Tax Credit <b>25%</b>	=	Total	Estimated Cred	dit Allocation
-	Reduction, if appli	cable.						•
	Ratio Reduction			#DIV/0!		Estimated Cre  Amount of Re		\$ - #DIV/0!
- Is this more than -30%? #DIV/0!  - Additional Penalty Reduction if more than 30% #DIV/0!					ESTIMATED CREDIT AMOUNT			
<ul> <li>- Additional Penalty Reduction if more than 30% #DIV/0!</li> <li>- Percentage decrease + penalty reduction (10%) #DIV/0!</li> </ul>						With reduction, if applicable		
	credit Allocation	Reduction		unt of Reduction			"DIV	<i>1</i> 01
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Sectio	n 8: FINAL C	REDII AM	OUNI					
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Note: Cre	edit allocation applie	es only to the fi	rst \$10 millio	on of qualifi	ed expend	itures for indep	endents.	
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	Adjusted Credit I	Oue to Oversta	tement:		#	יייין (אוט!		
	FINAL C	REDIT AMO	DUNT:		#C	OIV/0!		

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### **Independent Productions**

# Section 9: CERTIFICATION

□ By typing in the applicant's name in the designated box on the Expenditure Stapplicant's acknowledgement, agreement, and certification that the applicant has including all its attachments and that the content provided in the Expenditure Sur and accurate to the best of his or her knowledge or at least the knowledge of what person in the same capacity.	read and reviewed the application, mmary Report by the applicant is true
Applicant's Name	
Applicant's Title	
Applicants Title	
Date	
I certify under penalty of perjury under the laws of the State of California that I exincluding all attachments and that, to the best of my knowledge, its content is true	
Signature of Qualified Taxpayer / Representative	
Printed Name and Title	
Date	

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